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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) **IRL PAC** P.O. Box 10460 ADDRESS (number and street) (Check if address is changed) Burke 22009-0460 VA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS IRLPAC@Yahoo.com (Check if address is changed) Optional Second E-Mail Address getm1@cox.net COMMITTEE'S WEB PAGE ADDRESS (URL) https://secure.piryx.com/donate/B1ro9J2C/IRLPAC/ (Check if address is changed) DATE 2013 C00402982 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Tara Tamargo, Assistant Treasurer Type or Print Name of Treasurer Tara Tamargo, Assistant Treasurer [Electronically Filed] 07 18 2013 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. **FEC FORM 1**

Of	ffice		For further information contact:
ılu	Jse		Federal Election Commission
0	Only		Toll Free 800-424-9530 Local 202-694-1100